



**Town of Sullivan's Island
2056 Middle Street
P.O. Box 427
Sullivan's Island, SC 29482
843-883-5727**

Business License Update Request

This form is to be completed when a business license update is required. Complete the information below and submit to Town staff with the project proposal, estimate, scope of work, etc.

PROJECT ADDRESS: _____

PROJECT TYPE: _____

START DATE: _____ **ESTIMATED END DATE:** _____

COMPANY NAME: _____ **SC LLR LICENSE NUMBER:** _____

CONTRACT AMOUNT: _____ **BL LICENSE FEE:** _____

I (we) do hereby certify that the information given in this application is true. I understand that issuance of a Town business license does not relieve me of the responsibility of meeting all Town of Sullivan's Island Zoning and Building Code requirements, and that I am subject to all provisions of the business license ordinance of the Town of Sullivan's Island.

PRINT

SIGNATURE

DATE